

Liquor Control Board Licensing and Regulatory Services PO Box 43098 Olympia WA 98504-3098 360/664-1616 www.liq.wa.gov

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## **Application for Class 1, 2 or 6 Permit**

Type of Permit (Choose one)				
☐ Class 1 Permit - \$5 fee				
	hysician, dentist, a person in charge of an institution um, or a home devoted exclusively to the care of aged			
☐ Class 2 Permit \$ 5 fee to purchase \$10 fee to purchase	<del>-</del>			
pursuits requiring alcohol (RCW 66.20.010(2	n a mechanical or manufacturing business, or in scientific 2). (There is no fee for city, county, state or federal cation institutions.) The use of alcohol for beverage			
☐ Class 6 Permit \$5 fee				
To purchase liquor by a person operating a (RCW 66.20.010(6).	drug store, to be sold on the prescription of a physician			
Name of Applying Business				
Name of Person Representing Business				
Type of Business				
Business Address				
(Street or Route, City, State, Zip Code)				
Mailing Address (if different than above): (Street o				
Phone No. (Street o	r Route, City, State, Zip Code)			
Specific purpose for which alcohol or liquor is to	be used:			
Approximate amount of alcohol or liquor required	I for current fiscal year:			
	nswers contained in this application are true, correct, and derstood that a misrepresentation of fact is cause for rejection ued.			
Signature Tit	le Date			

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